



CYFAR

Children, Youth,  
and Families  
At Risk  
Program

CYFAR Philosophy

## CHILDREN, YOUTH, AND FAMILIES AT RISK PHILOSOPHY

### Children and Youth At Risk

All children and youth experience some degree of risk as they progress from birth to adulthood. An increasing proportion of American children are at substantially higher risk for negative outcomes such as infant mortality, undernourishment, child abuse and neglect, poor health, substance abuse, teenage pregnancy, crime, violence, and academic underachievement, due to family, community, social, political, and economic conditions which they have not created. In fact, a recent report by stated that, “at least 25% of adolescents in the United States are at serious risk of not achieving productive adulthood (The National Research Council, 2002).

Current statistics indicate that 16.2% of U.S. children live in poverty (Children's Defense Fund, 2001). Although the percentage of children living in poverty under age 18 has decreased in the last ten years, 11.6 million children lived in poverty<sup>1</sup> in 2000. While a majority of children who live in poverty are **White** (7.3 million, 13%) close to a third of all **Black** children and a fourth of all **Hispanic** children are poor (HHS, 2000). **Poverty** is a problem in rural towns, suburban areas and central cities and significantly exacerbates most other risk factors. In fact, “Poverty is closely linked with a number of undesirable outcomes in such areas as health, education, emotional welfare, and delinquency (Kids Count, 2002).” For example, the infant mortality rate, despite being at an all time low, is more than 50% higher for children born into families below the poverty line than for children born into families above the poverty line. Although vaccination rates are up among 2 year olds, a child is less likely to have received one if the family is living below the poverty line. Furthermore, the risk of death by disease for poor children and youth can be up to five times greater than children at higher income levels (CDC Fact Book, 2000/2001; Kids Count, 2002). (See Appendix)

Violence is taking a huge toll on children and youth in America. In 1999, close to 2.9 million children were reported as suspected victims of child abuse or neglect (HHS, 2001<sup>a</sup>) Homicide is the 2<sup>nd</sup> leading cause of death among 15 – 19 year olds and the leading cause of death among Black youth (Child Health USA, 2001; Fox & Zawitz, 2001). According to the Youth Risk Behavior Surveillance survey (2001), a third of all high school students surveyed had been in one or more physical fights in the last year and 17.4% of students had carried a gun, knife or club to school in the last month. About 8.9% of students in grades 9 – 12 report being threatened or injured on school property in 2001. A slightly smaller percentage, 6.6%, have reported missing one or more days of school because they felt unsafe either at school or traveling to and from school.

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<sup>1</sup> The poverty threshold in 2000 for a 2 parent 2 child household was \$17,463; a single parent two child household was below the poverty line if they made less than \$13,874.

*Every day 5 children or youth commit suicide; 9 are victims of firearms; 9 are victims of homicide; 180 are arrested for violent crime; 367 are arrested for drug abuse; and 7,883 are reported victims of abuse or neglect (Children's Defense Fund, 2002).*

Children and youth across the nation face additional risk factors that could significantly impact positive youth development. 13 million children and youth are food insecure<sup>2</sup> (Nord et al., 2001). 14% of children and youth under the age of 18 do not have health insurance (HHS, 2002). 11% of 16 – 24 year olds have dropped out of high school and/or fail to receive a GED (Kids Count, 2001). Close to 3.75 million adolescents are diagnosed with an STD each year. And as of December 2000, the reported number of new cases of pediatric AIDS was 8,908 (Child Health USA, 2001).

These children are at immediate risk for not meeting fundamental needs for safety, shelter, food, and care. They are at risk for not surviving the violence in their neighborhoods; not having adequate care or adequate food, much less developing the basic skills of reading, language, and computation. Longer term, they are at risk for not becoming responsible family members or participants in the work force or in the work of citizens in the larger world. These youth and their families are the focus of the Children, Youth, and Families at Risk National Program.

Youth programs are not filling the gaps or preventing the crisis. Many communities simply do not have supervised educational programs in which youth can participate after-school or on weekends. Other communities do not offer programs that appeal to youth or foster long term participation (McLaughlin, 2000). Children and youth from low-income families are at a further disadvantage because of financial and transportation needs limit their ability to access youth development programs.

A recent compendium of research by the National Research Council (2002) found that a considerable number of young people are not participating in after-school or community-based programs. For example, one national study found that 60% of youth were not involved in any form of community-based activity. A second study indicated that close to 80% of youth had not participated in a structured out-of-school activity. Newman (2000) found that 11 million youth were without after-school programming and the General Accounting Office estimates that in 2002, child care programs will meet only 25% of urban families' child care needs. However, a survey sponsored by the YMCA indicated that more than half of the youth surveyed would be interested in more after school programs in their community (The National Research Council, 2002).

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<sup>2</sup> Food insecurity is defined as, "being uncertain of having, or unable to acquire enough food to meet basic needs for all household members because they had insufficient money and other resources for food."

Clearly, the situation is reaching crisis proportion and provides a serious threat to the well-being, and survival of children, youth, families, and communities in America. The American work force, the economy, the social structure, education, justice, and democratic government are all weakened when basic needs of such a large proportion of children, youth and families are not being met. Escalating public costs of health care, remedial education, foster care, adjudication, incarceration, and welfare illustrate the impact of not addressing the needs of these families. Not only fiscal responsibility, but a moral imperative to bolster opportunity for every child and family in America demand action.

## **The Extension Response**

The Cooperative Extension System (CES) response to pervasive conditions in America which place children and their families at risk for not meeting their basic physical and social needs and not building the basic competencies necessary for successful participation in childhood, adolescent, and adult life is the Children, Youth, and Families At Risk (CYFAR) Program. With the CYFAR National Program, the Families, 4-H and Nutrition Unit in the Cooperative State Research, Education and Extension Service (CSREES), USDA makes a commitment to supporting programs for at risk youth and limited resource families as a part of the educational outreach mission of the Land-Grant University system.

## **Vision**

***“The CYFAR vision is of American families and communities in which children and youth lead positive, secure, and happy young lives while developing the skills, knowledge, and competencies necessary for fulfilling, contributing adult lives.”***

## **Mission**

***“The CYFAR Program integrates resources of the Land Grant University Cooperative Extension System to develop and deliver educational programs that equip limited resource families and youth who are at risk for not meeting basic human needs, to lead positive, productive, contributing lives.”***

## **Research Base**

Programs which have been most effective in addressing needs of at-risk children, youth, and families, possess some common elements. The following are attributes of effective programs:

- 1. Active Involvement** – Effective programs allow children, youth and families to be active agents in their own development. This is

accomplished by including participants in the decision making process and identifying, building upon, and utilizing their diverse talents, skills, and interests. Local knowledge and input is invaluable. Successful programs challenge and empower participants with the skills and opportunities to make a difference in their own lives and in their communities.

2. **Supportive and Knowledgeable Relationships** – Warmth, connectedness, good communication, knowledge, high expectations and support are essential components found in an effective program. These attributes function to develop commitment and trust among all participants. Extensive training in age and culturally appropriate programs, youth development principles, and interpersonal relations, provide program leaders with the ability to strengthen their rapport with participants, make connections, and provide them with relevant and useful information.
3. **Community Based, Holistic Philosophy** – Effective programs see the child in the context of the family and community and recognize the multiple interactions and inter-relationships that exist. They encourage communications and integration of youth, family, school and community efforts. This network facilitates a consistent environment and web of support. Successful programs also address development throughout the lifespan and provide children and families with frequent, intense and continuing support.
4. **Safe Haven** – Individuals who allot physical, psychological, and cognitive resources to coping with violence in their peer group, family or community are at risk for negative developmental outcomes including but not limited to post-traumatic stress disorder, aggression, fewer friendships, and lower levels of achievement. Safety from physical and psychological harm are necessary requisites to positive development. In fact, youth identify security as one of the principle requirements for a community-based program that they would feel comfortable attending. Programs that are accessible to youth and families and are able to provide safe peer and group interactions create a positive environment for healthy development.
5. **Multiple Components/Theoretically Based** – Effective programs recognize different learning styles and developmental stages. Desired outcomes are achieved by teaching a range of life skills and competencies through multiple teaching mediums. Successful programs are theory based and address a clear and defined set of programmatic goals.
6. **Structure and Accessibility** – Programs that provide clear and consistent rules and expectations, a structured environment and age/culturally appropriate monitoring and curricula support positive behavior and development. Choosing appropriate material that considers age, cultural, and economic differences allows programs to adapt curricula

to the interests and needs of their specific population. Effective programs are also easy, safe, and economically viable for youth and family members to access.

- 7. Resiliency and Asset Development** – Current research indicates that successful and/or resilient individuals are those that possess a series of personal and social assets. Effective programs promote asset development in the physical, intellectual, psychological, emotional, and/or social domain, teach life skills, and provide opportunities for skill building.
- 8. Collaboration** – Effective Programs cross bureaucratic lines, are collaborative works of many agencies, organizations, and citizens. Collaborations of agencies working with citizens can reduce duplication of efforts, create higher quality programs, and bring increased resources to bear strategically on identified problems. Furthermore, combining education and health with social service, law enforcement and judiciary programs, consolidates services, strengthens support to children and their families and allows for a comprehensive system of care and information exchange.
- 9. Diversity** – Complex problems require input from diverse experiences, cultures, perspectives and ideas. Effective programs engage the broadest spectrum of people who have an interest in the specific needs of their community and who can bring diverse resources to solving problems.
- 10. Address Complex Conditions** - Effective programs recognize complex conditions which place families and youth at risk. They focus on causes at the same time as they address immediate symptoms. They focus on changing and fixing systems rather than trying to "fix" youth and families. They work to influence power and decision making processes which determine policy and change.

### **Cooperative Extension Strategies**

The seriousness and magnitude of the problems facing children and families warrant the commitment of both youth and family development units and professionals. Extension has the capacity to provide a broad spectrum of educational programs for children, youth, and families prenatal to late teen. Youth centered programs are directed to youth 5-19 and encourage involvement of parents and families of the youth. Family centered programs work directly with families and impact children and youth through their parents. The most fruitful point of entry for any particular community or family must be determined by clear knowledge of that community or family. The particular program strategy employed in a community will be determined by the needs identified and prioritized by the people in the community.

Extension programs for people in at-risk environments should be based in child, youth, and family development research and on what research has shown to be effective program strategies. Extension strategies can be linked to attributes of effective programs if they:

### **1. Promote Active Involvement**

Extension can engage citizens in identifying and addressing needs of children, youth, and families in their own neighborhoods and communities. The combination of risk factors that will be addressed in a particular community will depend upon the level of community commitment and the resources made available. Clear knowledge of, and involvement by, the citizens who live in the community is imperative for effective programs. Extension builds partnerships with citizens and coalitions with other agencies to develop comprehensive educational programs which meet identified needs. Extension works with youth and adults to develop leadership competencies--for responsible parents and in their neighborhoods and communities. By involving youth and families in the communities Extension will be able to build a committed corps of volunteers and community-based organizations with a long term interest in maintaining the programs.

### **2. Build Supportive and Knowledgeable Relationships**

Training and staff development should be a fundamental component of Extension programs. Staff and volunteers should be provided with professional opportunities to learn about child and youth development, current issues that challenge families, strategies for working with unique populations, and local resources. This will expand their repertoire of skills to meet the emotional and cognitive needs of children, youth and families and facilitate the building of supportive and knowledgeable relationships.

### **3. Exemplify a Community Based, Holistic Philosophy**

Cooperative Extension has the capacity to develop programs which meet concurrent needs of the whole family, and programs which provide individual children and youth with intensive, long term educational experiences. Programs can intervene early (prenatally) in a child's life and keep youth and families involved. Extension can support families in meeting other social service and health needs as they provide a broad spectrum of educational programs aimed at empowering families to take responsibility for their lives. Extension can work with citizens and agencies to examine and address community issues which impact their children, youth, and families. Extension can partner with schools and other youth serving organizations to extend educational experiences for older children and teens as they seek activities away from family and immediate

neighborhoods.

#### **4. Provide a Safe Haven**

Cooperative Extension has staff, curriculum, and resources to establish safe havens for young children and school age and teens during out of school time. Extension can work with local organizations to ensure that participants are able to safely transport themselves to and from the program. Programs can be designed to provide a safe environment and promote conflict resolution skills. Staff can work to abolish exclusionary behavior.

#### **5. Provide Multiple Components and Theoretically Based Programs**

Extension professionals have developed research-based curricula and programs that serve to meet the needs of diverse populations. Depending upon the educational needs identified by the families and youth in the communities, the CES can provide educational research-based programs in: nutrition, family resource management, well baby care, parenting skills, child development, youth development, substance abuse prevention, and a wide variety of life skills education programs for youth of all ages.

#### **6. Insure Appropriate Structure and Accessibility**

The CYFAR Program strives to streamline educational program delivery and provide easier access to Extension programs for those families and youth who most need them. Family members can receive educational programs in the same facilities. Child care and parent activities can be combined with youth development activities. Joint educational needs of family members can be met concurrently and consistently. The CES implements educational programs which assist parents in providing care and support to their children. Education programs teach parents the importance of having high expectations for their children, and providing structure, discipline, and clear rules and regulations for their children at the same time they encourage their participation in the life and work of the family and hold them accountable.

#### **7. Bolster Resiliency and Facilitate Asset Development**

Extension programs for youth are built on: 1. protective factors—social competencies, decision making, problem solving, autonomy, communication skills, sense of humor, sense of purpose and future; and 2. community support structures--social networks, peer groups, intergenerational relationships, opportunities for involvement in positive, meaningful work of the community.

#### **8. Instill Collaboration**



Objectives for programs for children, youth, and families can be accomplished through collaborations among Extension, Land-Grant University Departments, businesses and other private sector partners, and youth and family serving organizations. Extension can serve as a catalyst and vital contributor for developing and maintaining collaborations for Children, Youth, and Families. Extension professionals can bring to collaborations their experience with recruiting, training and partnering with volunteers to expand delivery of Extension education programs. By establishing collaborations, all agencies can make efficient use of human and financial resources and create higher quality, more comprehensive, and more effective programs.

## **9. Solicit and Value Diversity**

CYFAR programs and staff should reflect the diversity of the community. Extension must continue to bring together diverse perspectives, experiences, and expertise of the at-risk community, the Extension Service, the University, and other collaborating agencies to build the best possible programs for children and youth and their families. Extension must become an organization which promotes diversity in programs, staff development, and personnel management.

## **10. Address Complex Conditions**

Extension can identify underlying conditions which place children and families at risk. They can work with families and communities to develop programs and advocate for public policies to address these conditions. They can deal with symptoms and focus program resources on underlying causes for public problems. Extension salaried and volunteer staff will be recognized as advocates for children, youth, and families.

## **Nationwide Extension Outcomes for Children, Youth, and Families**

To develop and deliver educational programs that equip limited resource families and at risk youth to lead positive, productive, contributing lives, CYFAR coordinates Land-Grant university resources to achieve national children, youth, and family outcomes. Program plans are written with objectives tied directly to the following outcomes. Achievement of the CYFAR Mission is determined by evidence of expansion of programs for and increased numbers of limited resource families and at risk children and youth served. Program impact is generated using indicators related directly to individual program objectives.

## **1. EARLY CHILDHOOD**

Children will have their basic physical, social, emotional, and intellectual needs met. Babies will be born healthy.

## **2. SCHOOL AGE (K-8)**

School age youth will demonstrate knowledge, skills, attitudes, and behavior necessary for fulfilling contributing lives.

## **3. TEENS**

Teens will demonstrate knowledge, skills, attitudes, and behavior necessary for fulfilling contributing lives.

## **4. PARENTS/FAMILIES**

Parents will take primary responsibility for meeting their children's physical, social, emotional, and intellectual needs and provide moral guidance and direction. Families will promote positive, productive, and contributing lives for all family members.

## **5. COMMUNITIES**

Communities will provide safe and secure environments for families with children.

### **Organizational Changes in the Cooperative Extension System**

Significant organizational changes are necessary to build a support structure within CES to achieve the five outcomes for children, youth, and families in communities; to sustain the community based programs; and to institutionalize the CYFAR mission. Organizational strategies to support the CYFAR mission include:

1. Develop and implement a **common vision** and strategic plan for programming for children, youth, and families at risk.
2. Train, support, and **reward Extension salaried and volunteer staff** for implementing programs which accomplish the CYFAR mission.
3. Recognize **Extension professionals as critical resources** in research and education for children, youth, family, and community issues.
4. Promote **diversity, inclusiveness, and pluralism** in Extension programs, staffing, personnel management and training, and policies.

5. Promote **internal collaborations** of Extension 4-H, Family and Consumer Sciences, Agriculture, and Community Development; and other University departments in programming for children, youth, and families at risk across the state.
6. Promote and join **external collaborations** of community, county, State and Federal agencies and organizations to strengthen program and policy for children, youth and families.

## **CYFAR Funding**

**State Strengthening (STST)** and **New Communities (NCP) Projects** serve as the CSREES mechanism for funding community-based projects and expanding statewide capacity for supporting and sustaining programming for at risk youth and families. These projects call for collaboration across disciplines, program areas, and geographic lines as well as a holistic approach which views the individual in the context of the family and community.

The CYFAR Program allows Extension the flexibility to provide a broad spectrum of educational programs for at-risk children, youth and their families in communities. The particular program strategy employed in a community is determined by the needs identified and prioritized by the people in that community. Community-based programs should provide positive developmental opportunities for young children, school age youth and teens, families, and parents.

Reports of all currently funded CYFAR Projects are available on the **CYFAR website at: <http://www.cyfernet.org/databases/cyfarreporting/public/>**

State Strengthening and New Communities Projects are expected to build and sustain statewide capacity to program for at-risk audiences. Effective CYFAR projects utilize the expertise and resources of the total Land-Grant University System, the **National Children, Youth, and Family Education and Research Network (CYFERnet)**, as well as existing programs and resources in their states.

In the interest of sustaining and expanding community programs for at-risk children and families, the CYFAR Program also funds a broad variety of support and technical assistance including:

## **Computers and Internet Connectivity**

As part of State Strengthening and New Communities Projects, CSREES provides computers, Internet connectivity, and training in essential technology skills to staff, youth, and adults in CYFAR community program sites to insure access to youth and adults least likely to have home computers.

## **CYFERnet**

Through CYFERnet, universities merge program, technology, and evaluation resources to provide access to research, curriculum sources, program materials, and training to community and state CYFAR projects. In addition to providing the electronic information infrastructure, University faculty serve on CYFERnet Editorial Boards to jury all resources which are selected for posting on CYFERnet, thus assuring high quality, research based information. CYFERnet university faculty also provide technical assistance on integration of program and technology for community programs and model effective uses of technology for communications, program management, and distance teaching and staff development. Counties and communities use CYFERnet to share their programs and materials and expertise of staff and volunteers who provide the direct educational programs.

Evaluation studies conducted by CYFERnet partners have provided information about the effectiveness of various aspects of the CYFAR program.

**CYFERnet Evaluation National Organizational Change Studies:** This report provides a snapshot of the state of Extension in 1997 and 1998 with regard to its organizational ability to support quality programming for children, youth, and families at risk. Available at: <http://ag.arizona.edu/fcr/fs/cyfar/>

**CYFERnet Evaluation Sustainability Studies:** This study assessed 94 community-based projects funded by the CYFAR Initiative in order to better understand program sustainability for at risk audiences. The report examined the current status of youth at risk projects originally funded by the CYFAR two and a half years after USDA funding ended; the dominant ways that projects have continued; and the role of Cooperative Extension in supporting community-based projects for at risk youth and families. Available at: <http://www.ext.vt.edu/vce/specialty/famhumdev/350-801.html>

**CYFERnet Connectivity Study:** This study examined how community-based CYFAR projects utilize technology to reach at-risk audiences. The goals of the study were to: 1) Determine how CYFAR connectivity funds have impacted local communities, including children, youth and families at risk; stakeholders; and collaborators and 2) Identify lessons learned in improving technology access and literacy among low-income children, youth and families; community project staff; and the broader community.

Available at: is available at: <http://www.cyfernet.org/eval/ccs2.html>

## **Annual CYFAR Conferences**

CSREES sponsors a national conference for and by University, county, and community professionals and their collaborators who are engaged in programming for at risk children, youth, and families. CYFAR Conferences which include keynote speakers, research lectures, workshops, sharefairs, interact sessions, and computer lab sessions, are planned by a national committee and provide opportunities for learning and sharing information and program experiences.

Working collaboratively across geographic, discipline, and political lines is resulting in better programs, more efficient use of resources, and more clear public perspective and appreciation of the educational programs of the Cooperative Extension System. These changes are being institutionalized to insure that the goal of improving educational programs for limited resource families and at risk youth targeted by the CYFAR Program will continue over the long term.

## **References**

Kids Count Data Book (2002). Washington, D.C.: Produced for the Annie E. Casey Foundation by Population Reference Bureau, 2002 [on-line].  
<http://www.aecf.org/publications/#kidscount>

America's children: Key national indicators of well-being, 2001. Federal Interagency Forum on Child and Family Statistics: U.S. Dept. of Education, Office of Educational Research and Improvement, Educational Resources Information Center. [on-line] <http://www.childstats.gov/americaschildren/>

CDC Fact Book 2000/2001. Department of Health and Human Services. [on-line] [www.cdc.gov](http://www.cdc.gov) / <http://www.cdc.gov/maso/factbook/main.htm>

Child Health USA 2001. U.S. Dept. of Health and Human Services, Public Health Services, Health Resources and Services Administration, Bureau of Maternal and Child Health and Resources Development, Office of Maternal and Child Health. [on-line] <http://www.mchirc.net/pdf%20docs/chusa01.pdf> / <http://www.mchirc.net/CH-USA.htm>

Child Trends Data Bank: <http://www.childtrends.databank.org/index.htm>

Children's Defense Fund:

<http://www.childrensdefense.org/everyday.htm#uschildren>

Ebenhardt, MS., Ingram, DD., Makuc, DM., et al. Urban and Rural Health Chart Book, Health United States, 2001. Hyattsville, Maryland: National Center for Health Statistics, 2001. <http://www.cdc.gov/nchs/data/hus/hus01.pdf>

Eisen, M., Pallitto, C., Bradner, C., and Bolshun, N. (2000). Teen Risk Taking" Promising prevention programs and approaches. The Urban Institute.

Fowler, L.K. Building Resilient Families for Strong Communities. Fact Sheet Family Life Month Packet, Family and Consumer Sciences, The Ohio State University Extension.

Fox, J.A. and Zawitz, M.W. (2001) Homicide Trends in the United States. Bureau of Justice Statistics [on-line] [www.ojp.usdoj.gov](http://www.ojp.usdoj.gov)

Nord, M., Kabbani, N., Tiehen, L. Andrews, M., Bicke, G., and Carlson, S. (2001) Household Food Security in the United States, 2000/FANRR-21. ERS Food Assistance and Nutrition Research Report No. (FANRR)21.,44. <http://www.ers.usda.gov/publications/fanrr21/>

Johnston, L.D., O'Malley, P.M., and Bachman, J.G. (2002). Demographic subgroup trends for various licit and illicit drugs, 1975 – 2002. (Monitoring the Future Occasional Paper No. 57) [On-line] Ann Arbor, MI: Institute for Social Research: Available: <http://monitoringthefuture.org>

Johnston, L.D., O'Malley, P.M., and Bachman, J.G. (2002). Monitoring the Future national results on adolescent drug use: Overview of key findings, 2001. (NIH Publication No. 02-5105). Bethesda, MD: National Institute on Drug Abuse.

Kaufman, P., Chen, X., Choy, S.P., Ruddy, S.A., Miller, A.K., Fleury, J.K., Chandler, K.A., Rand, M.R., Klaus, P., and Planty, M.G. (2000). Indicators of School Crime and Safety, 2000. US Department of Education and Justice. NCES 2001-017/NCJ-184-176, Washington DC 2000. <http://nces.ed.gov/pubs2001/crime2000/>

Kirby, D. and Coyle, K. (1997). Youth Development Programs. Children and Youth Services Review, 19(5/6): 437-454.

McLaughlin, M. (2000). Community Counts: How Youth Organizations Matter for Youth Development. Washington D.C. Public Education Network <http://www.publiceducation.org/pubs/cc.htm>

National Research Council and Institute of Medicine (2002). Community Programs to Promote Youth Development. Committee on Community-Level Programs for Youth. Jacqueline Eccles and Jennifer A. Goodman, eds. Board on Children, Youth and Families, Commission on Behavioral and Social Sciences and Education, National Research Council and Institute of Medicine.

Newman, S., J.A. Fox, E., Flynn, and W. Christenson. America's After School Choice: The Prime Time for Juvenile Crimes, or Youth Enrichment and Achievement. Washington, DC: Fight Crime: Invest in Kids. [www.fightcrime.org](http://www.fightcrime.org)  
Renison, C.M. (2001). Criminal Victimization in 2000 Changes 1999 – 2000 with Trends 1993- 2000. Bureau of Justice and National Crime Victimization Survey. <http://www.ojp.usdoj.gov/bjs>

Some things do make a difference for youth: a compendium of evaluations of youth programs and practices (1997). Washington, D.C : American Youth Policy Forum; Institute for Educational Leadership. <http://www.aypf.org/>

Table 107 – Percent of high school dropouts (status dropouts) among persons 16 – 24 years old, by income level, and distribution of dropouts by labor force and educational attainment: October 1970 to October 1999. U.S. Department of Commerce, Bureau of the Census, Current Population Survey, unpublished data.

U.S. Department of Health and Human Services. Trends in the Well Being of American Children and Youth (2002). Office of the Secretary for Planning and Evaluation. <http://aspe.hhs.gov/hsp/00trends/>

U.S. Department of Health and Human Services<sup>a</sup>, Administration of Children, Youth, and Families, 10 Years of Reporting Child Maltreatment 1999 (2001).

U.S. Department of Education, National Center for Education Statistics, Fast Response Survey System, Internet Access in U.S. Public Elementary and Secondary Schools; Advanced Telecommunications in U.S. Public Elementary and Secondary Schools, 1995; and unpublished data.

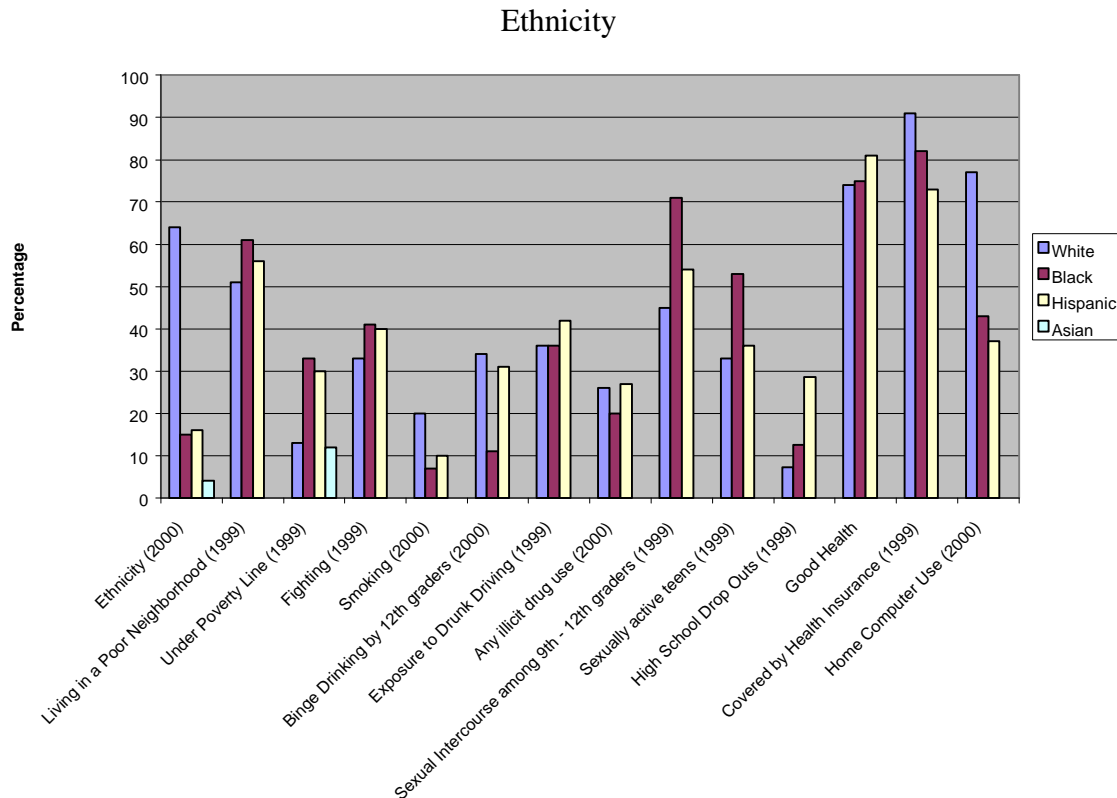
U.S. Department of Education, National Center for Education Statistics, The condition of Education, 2000. NCES 2000-062, Washington, DC: U.S. Government Printing Office, 2000.

U.S. Department of Labor (1997). National Longitudinal Survey of Youth. [www.bls.gov](http://www.bls.gov)

Understanding Poverty (2001). Danziger, S.H. and Haveman, R.H. (Eds.). New York : Russell Sage foundation. <http://www.hup.harvard.edu/catalog/DANUND.html>

Youth Risk Behavior Surveillance — United States, 2001. *MMWR*; June 21, 2002; 51(SS04); 1-64. <http://www.cdc.gov/nccdphp/dash/yrbs/>





- Percentage distribution of children under age 18 by race and Hispanic Origin<sup>1</sup>
- Percentage of related children who live in neighborhoods where 40% or more of the residents are poor, by race and Hispanic Origin.
- Percentage of children under age 18 living below the poverty level by race and Hispanic origin
- Percentage of children under age 18 who are covered by health insurance by race and Hispanic origin
- Percentage of students in grades 9 – 12 reporting that they have been in a physical fight within the past year by race and Hispanic origin.
- Percentage of students in grades 9 – 12 who report frequent smoking by race and Hispanic origin
- Percentage of 12<sup>th</sup> graders in the United States who reported binge drinking by race and Hispanic origin
- Percentage of students in grades 9 -12 who reported driving after drinking alcohol or riding with a driver who had been drinking alcohol by race and Hispanic origin.
- Percentage of 12<sup>th</sup> grade students who report having used any illicit drugs in the previous 30 days by race and Hispanic origin
- Percentage of students in grades 9 – 12 who reported ever having sexual intercourse by race and Hispanic origin

<sup>1</sup> Trends in the Well Being of American Children and Youth (2000). U.S. Department of Health and Human Services. Office of the Secretary for Planning and Evaluation. <http://aspe.hhs.gov/hsp/00trends/>

- Percentage of students in grades 9 – 12 who reported having had sexual intercourse in the previous 3 months by race and Hispanic origin
- Status school dropout rates for ages 16 – 24 by race/ethnicity<sup>2</sup>
- Percent of children under 18 in good health by race and Hispanic origin
- Percent of children under 18 covered by Health Insurance by race and Hispanic origin<sup>3</sup>
- Home computer access or use of internet by children 3 - 17<sup>4</sup>

Current estimates place the population of the United States at 281,421,906. Roughly 25% or 72 million are children and youth up to the age of eighteen. This represents a 14% increase in ten years. Preschool and elementary school children 0 – 11 years old comprise a majority of the under 18 population (48 million vs. 24 million). The ethnic make up of the 18 and under population is largely non-Hispanic. As you can see from the above graph, 64% of the child and youth population is White while less than 5% is Asian.

As noted in the above graph, ethnicity is associated with several negative outcomes. Black and Hispanics children are more likely to live in poor neighborhoods than non-Hispanic White children. Similarly, Black and Hispanic children and youth are more likely to live in poverty, drop out of high school, engage in sexual activity, and have been involved in a physical fight than non-Hispanic White children and youth. Hispanic and non-Hispanic White adolescents, however, are more likely to smoke, binge drink, and use illicit drugs, than Black adolescents.

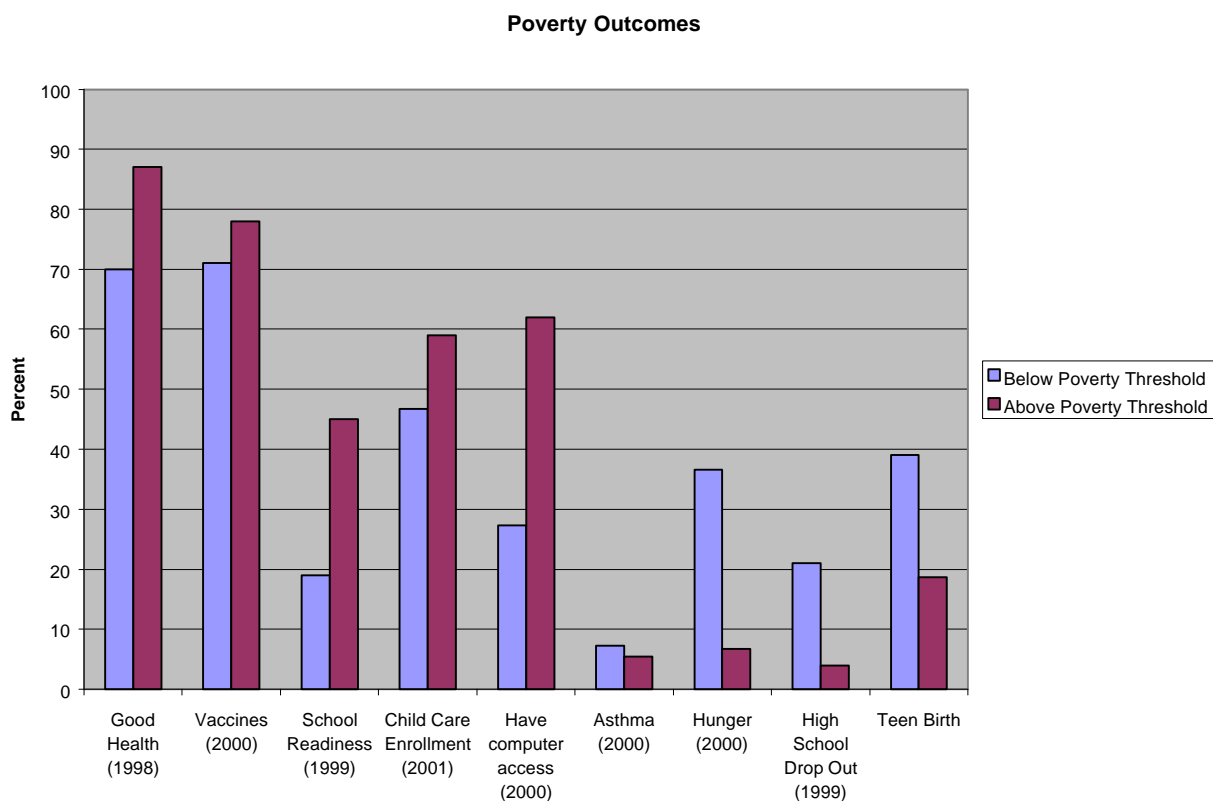
Note that non-Hispanic White adolescents are more likely to have a computer at home than either Blacks or Hispanics.

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<sup>2</sup> Child Health USA 2001. U.S. Dept. of Health and Human Services, Public Health Services, Health Resources and Services Administration, Bureau of Maternal and Child Health and Resources Development, Office of Maternal and Child Health. <http://www.mchirc.net/pdf%20docs/chusa01.pdf/>  
<http://www.mchirc.net/CH-USA.htm>

<sup>3</sup> Trends (2000)

<sup>4</sup> Newberger, E. (2001). Home computers and internet use in the United States: August 2000. Current Population Reports. U.S. Department of Commerce, Economics and Statistics Administration. U.S. Census Bureau.



- Percent of children in families in good health either below or at/above the poverty line<sup>1</sup>
- Vaccinations of children 19 – 35 months of age by poverty status<sup>2</sup>
- Percentage of children ages 3 – 5 with three or four cognitive/literacy school readiness skills by poverty status<sup>3</sup>
- Percentage of children 3 – 5 who are enrolled in center based early childhood and education programs by poverty status<sup>4</sup>
- Percentage of children 3 – 17 whose family income is below \$15,000 vs. children 3 – 17 whose family income is at/above \$15,000.<sup>5</sup>
- Percentage of children 0 – 17 who have asthma by poverty status<sup>6</sup>
- Prevalence of food insecurity by households with children with income above and below 1.85% of the poverty threshold<sup>7</sup>
- Percentage of high school dropouts (status dropouts) among persons 16 – 24 by family income quartiles (lowest quartile vs. highest quartile)<sup>8</sup>
- Percentage who had a teen birth (poor versus not poor threshold not defined)<sup>9</sup>

As illustrated in the above graph, there are many negative outcomes associated with childhood poverty. Current data indicates that children growing up below the poverty threshold are less likely to be in good health, receive vaccinations, be prepared for school, or be enrolled in child care, than children whose family incomes are at or above the poverty threshold. Children who are living in poverty have higher asthma, food insecurity, high school drop out and teen birth rates than children who live at or above the poverty line. In addition, poor children are less likely to have access to materials that promote life skills or work preparedness. For example,

children living in poor households are less likely to have a computer in the home than children in higher income households.

Living in disadvantaged neighborhoods often increases a child's exposure to negative risk factors such as gangs, crime, and environmental hazards. For example, an individual in a household at 50% below the poverty threshold is significantly more likely to be the victim of a violent crime than an individual at any other income level. Poverty often affects a parent's mental and emotional health and hampers their ability to effectively raise their children. Poor parents are less able to provide the resources for their children that promote positive physical, cognitive, social and emotional growth.

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<sup>1</sup> America's children: Key national indicators of well-being, 2001. Federal Interagency Forum on Child and Family Statistics: U.S. Dept. of Education, Office of Educational Research and Improvement, Educational Resources Information Center. <http://www.childstats.gov/americaschildren/>

<sup>2</sup> Child Trends Data Bank: <http://www.childtrendsdatabank.org/index.htm>

<sup>3</sup> ibid

<sup>4</sup> ibid

<sup>5</sup> Home Computer Use in the United States August 2000. Current Population Reports, September 2000. US Department of Commerce, US Bureau of Statistics

<sup>6</sup> Child Trends Data Bank: <http://www.childtrendsdatabank.org/index.htm>

<sup>7</sup> Nord, M., Kabbani, N., Tiehen, L. Andrews, M., Bicke, G., and Carlson, S. (2001) Household Food Security in the United States, 2000/FANRR-21. ERS Food Assistance and Nutrition Research Report No. (FANRR)21.,44. <http://www.ers.usda.gov/publications/fanrr21/>

<sup>8</sup> Table 107 – Percent of high school dropouts (status dropouts) among persons 16 – 24 years old, by income level, and distribution of dropouts by labor force and educational attainment: October 1970 to October 1999. U.S. Department of Commerce, Bureau of the Census, Current Population Survey, unpublished data.

<sup>9</sup> Understanding Poverty (2001). Danziger, S.H. and Haveman, R.H. (Eds.). New York : Russell Sage foundation. <http://www.hup.harvard.edu/catalog/DANUND.html>